# FORM D

UNITED STATES
SECURITIES AND EXCHANGE COMMISSION
Washington, D.C. 20549

FORM D

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL									
OMB Number:									
		16	.00						
	SEC USE ONLY								
Prefix		Se	rial						
	1	_ !							
DATE RECEIVED									

							<del></del>				
Name of Offering Limited Partnership	·—		has changed, and i	ndicate change.)		1197	302				
Filing Under (Check I	box(es) that apply):	☐ Rule 504	☐ Rule 505			Section 4(6)	] ULOE				
Type of Filing:	☐ New Filing					R. B COMS	7.0.				
		A. BASI	C IDENTIFICAT	ION DATA	į	JUL 15	2004				
1. Enter the inform	### Interests of Yield Strategies Fund II, L.P.    Inig Under (Check box(es) that apply):										
Name of Issuer											
Yield Strategies Fund II, L.P.											
(240) 705 0755											
Address of Principal	Offices		(Number and Stre	et, City, State, Zip	Code)	Telephone Number (Including Area Code)					
(if different from Exe	cutive Offices)										
Brief Description of E	Business: Private In	vestment Company					PROCE				
Type of Business Or	ganization						ESSE				
	☐ corporation		partnership, already	formed		other (please specif	y) JUL 100				
	☐ business trust	☐ limited	partnership, to be fo	ormed			2 2004				
			Month	Y	ear		FINANCON				
Actual or Estimated	pe of Business Organization    corporation   limited partnership, already formed   other (please specify)   1 9 2004     business trust   limited partnership, to be formed   which is trust   limited partnership, to be formed   cut of Estimated Date of Incorporation or Organization:   0   6   19   93   Actual   Estimated   Comparison   Compar										

## GENERAL INSTRUCTIONS

### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

CN for Canada; FN for other foreign jurisdiction)

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service Abbreviation for State;

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

## **ATTENTION**

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number



#### Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer; Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual): Camden Asset Management, L.P. Business or Residence Address (Number and Street, City, State, Zip Code): 2049 Century Park East, Suite 330, Los Angeles, CA 90067 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director □ General and/or Managing Partner Full Name (Last name first, if individual): Wagner, John 2049 Century Park East, Suite 330, Los Angeles, CA 90067 Business or Residence Address (Number and Street, City, State, Zip Code): Check Box(es) that Apply: Promoter Beneficial Owner □ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual): First Data Corp Business or Residence Address (Number and Street, City, State, Zip Code): 6200 South Quebec Street, Englewood, Colorado 80111 Check Box(es) that Apply: ☐ Promoter Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual): Racers, Series 1998-P-10-3 Business or Residence Address (Number and Street, City, State, Zip Code): c/o The Bank of New York, 5 Penn Plaza, 13th Floor, New York, New York Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual): Business or Residence Address (Number and Street, City, State, Zip Code): Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual): Business or Residence Address (Number and Street, City, State, Zip Code): Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer □ Director ☐ General and/or Managing Partner Full Name (Last name first, if individual): Business or Residence Address (Number and Street, City, State, Zip Code): Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner □ Executive Officer □ Director General and/or Managing Partner Full Name (Last name first, if individual): Business or Residence Address (Number and Street, City, State, Zip Code): Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director ☐ General and/or Managing Partner

A. BASIC IDENTIFICATION DATA

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

1. ł	las the i	ssuer	sold, or de	oes the iss	suer intend					is offering? ling under			☐ Yes	⊠ No	
2. \	What is t	the mir	nimum inv	restment ti	nat will be	accepted	from any i	ndividual?				*******	\$ <u>no minimum</u>		
3. [	Does the	offeri	ng þermit	, joint owne	rship of a	single unit	?						⊠ Yes	□ No	
á (															
Full N	lame (La	ast nan	ne first, if	individual)	)										
Busin	ess or R	Resider	nce Addre	ess (Numb	er and Str	eet, City, S	State, Zip	Code)		<del></del>		<del> </del>	<del></del>		
Name	e of Asso	ociated	l Broker o	r Dealer											
						tends to S								☐ All States	
□ [A	r] []	[AK]	[AZ]	☐ [AR]	☐ [CA]	□ (co)		□ [DE]		[FL]	□ [GA]	[HI]	[ID]		
□ (ii	_) 🗆	[IN]	[AI]	□ [KS]	□ [KY]	□ [LA]	☐ [ME]	[MD]	[AM]	[IM]	[MN]	☐ [MS]	[MO]		
□ [N	MT]	[NE]	□ [NV]	□ [NH]	[NJ]	[MM]	□ [NY]	☐ [NC]		□ [OH]	□ [OK]		[PA]		
☐ (F	RI] 🗆	(SC)	SD]	[NT]				□ [VA]	□ [WA]	□ [WV]	[WI]	[YW]	[PR]		
Full	Name (La	ast nar	me first, if	individual	)										
Busir	ness or F	Reside	nce Addre	ess (Numb	er and Str	eet, City,	State, Zip	Code)		·				· · · · · · · · · · · · · · · · · · ·	
Nam	e of Ass	ociated	d Broker o	or Dealer											
						itends to S								☐ All States	
□ [ <i>P</i>	AL]	[AK]	[AZ]	[AR]	□ [CA]	[CO]		□ [DE]	□ [DC]	□ [FL]	☐ [GA]	[HI]	[ID]	_	
	u 🗆	[NI]	[Ai]	☐ [KS]			☐ [ME]		☐ [MA]	[IM]	☐ [MN]	☐ [MS]	☐ [MO]		
□ [N	ντη 🔲	[NE]	[NN]	□ [HM]	[N]	□ [NM]	□ [NY]	□ [NC]	□ [ND]	[OH]		□ [OR]	□ [PA]		
□ [F	RI] 🔲	[SC]	[SD]					[AV]	[AW]	[W√]		□ [WY]	[PR]		
Full I	Name (L	ast na	me first, if	individual	)				<del></del>						
Busi	ness or I	Reside	nce Addr	ess (Numb	per and St	reet, City,	State, Zip	Code)					·		
Nam	e of Ass	ociate	d Broker o	or Dealer											
State						ntends to S								☐ All States	
	•	[AK]	☐ [AZ]			☐ [CO]			□ [DC]	□ [FL]	□ [GA]	[HI]	[ID]	•	
ןן 🗀	니 🗆	[IN]	□ [IA]	□ [KS]	□ [KY]	[LA]	☐ [ME]	☐ [MD]	☐ [MA]	[MI]	[MN]	☐ [MS]	[MO]		
[1]	VIT)	[NE]	□ [NV]	□ [NH]	□ [NJ]	[MM]	□ [NY]	☐ [NC]	□ [ND]	[OH]	□ [ок]	□ [OR]	□ [PA]		
<b>(</b> F	RIJ 🔲	(sc)	☐ (SD)	[TN]	□ [TX]		[VT]	□ [VA]	[WA]	[W√]	[WI]	[WY]	□ [PR]		

**B. INFORMATION ABOUT OFFERING** 

(Use blank sheet, or copy and use additional copies of this sheet, as necessary)

	C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES A	ND U	SE OF PROCES	EDS	
۱.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box   and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate Offering Price		Amount Already Sold
	Debt,		0		00
	Equity		0		0
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$	. 0	\$	0
	Partnership Interests	\$	0	\$	0
	Other (Specify)limited partnerhip interests)	\$	300,000,000	\$	213,821,938
	Total	\$	300,000,000	\$	213,821,938
	Answer also in Appendix, Column 3, if filing under ULOE			-	
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors		Aggregate Dollar Amount Of Purchases
	Accredited Investors		87	<u>\$</u>	213,821,938
	Non-accredited Investors		0	<u>\$</u>	0
	Total (for filings under Rule 504 only)		N/A		N/A
	Answer also in Appendix, Column 4, if filing under ULOE				
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C–Question 1.				
	Type of Offering		Types of Security		Dollar Amount Sold
	Rule 505		N/A	<u>\$</u>	N/A
	Regulation A	<u></u>	N/A	\$	N/A
	Rule 504		N/A	\$	N/A
	Total		N/A		N/A
4.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.	<b>3</b>			
	Transfer Agent's Fees			\$	0
	Printing and Engraving Costs			\$_	0
	Legal Fees		🛮	\$	57,151
	Accounting Fees			\$_	0
	Engineering Fees			\$	0
	Sales Commissions (specify finders' fees separately)			\$	0
	Other Evpenses (identify)		П	¢	n

Total ......

57,151

b. Enter the difference between the aggregate offering p Question 1 and total expenses furnished in response to Pa "adjusted gross proceeds to the issuer."	art C-Question 4.a. This differen	ce is the		<u>\$</u> :	299,942,849
Indicate below the amount of the adjusted gross proceeds used for each of the purposes shown. If the amount for an estimate and check the box to the left of the estimate. The the adjusted gross proceeds to the issuer set forth in response.	ny purpose is not known, furnish a e total of the payments listed mus	an st equal			
			Payments to Officers, Directors & Affiliates		Payments to Others
Salaries and fees			\$	_ 🗆	\$
Purchase of real estate			\$	_ □	\$
Purchase, rental or leasing and installation of mac	hinery and equipment		\$		\$
Construction or leasing of plant buildings and facili Acquisition of other businesses (including the value	e of securities involved in this		<u>\$</u>		\$
offering that may be used in exchange for the asset pursuant to a merger			\$	_ 🗆	\$
Repayment of indebtedness			\$	🗆	\$
Working capital			\$	🛛	\$299,942,849
Other (specify):			\$	🗆	\$
·			\$	_ 🗆	\$
Column Totals			\$	⊠	\$299,942,849
Total payments Listed (column totals added)			$\boxtimes$	\$299 <b>,</b> 94	
	D. FEDERAL SIGNATUR	₹E			
This issuer has duly caused this notice to be signed by the ur constitutes an undertaking by the issuer to furnish to the U.S. by the issuer to any non-accredited investor pursuant to para	Securities and Exchange Comm	n. If this r	notice is filed under R on written request of	ule 505, the its staff, the	following signature information furnished
ssuer (Print or Type)	Signature / / / /			Date	
Yield Strategies Fund II, L.P.	Jet hid	uub-			ly 14, 2004
Name of Signer (Print or Type)  Jeffrey Andrews	Title of Signer (Frint or Type) C general partner of Yield Strate	hief Finar egies Fun	ncial Officer of Came ld II, L.P.	den Asset i	Management, L.P.,
beiney Andrews					
	ATTENTION				
Intentional misstatements or omiss	ions of fact constitute federal of	riminal v	iolations. (See 18 U.	S.C. 1001.)	
			•	•	

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

### E. STATE SIGNATURE

1. Is any party described in 17 CFR 230.252(c), (d), (e) or (f) presently subject to any of the disqualification provisions of such rule?

See Appendix, Column 5, for state response.

- 2. The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed, a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature 1 00 0	Date
Yield Strategies Fund II, L.P.	Signature Ala Qualums	July 14, 20044
Name of Signer (Print or Type)  Jeffrey Andrews	Title of Signer (Print or Type) Chief Financial Officer of Camde general partner of Yield Strategies Fund II, L.P.	n Asset Management, L.P.,

### Instruction:

Print the names and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manual not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

# **APPENDIX**

1	2		3	5					
	to non-a	to sell ccredited s in State - Item 1)	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of inv Amount purch (Part C -	ased in State	Disqualification under State ULOE (if yes, attach explanation of waiver granted) (Part E – Item 1)		
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
AL									ļ
AK		-					<del></del>		
AZ	<u> </u>								
AR		<del>  ,  </del>	1511	-	***************************************				
CA		X	L.P. Interests	32	\$34,243,284	0	\$0		X
co		X	L.P. Interests	2	\$22,958,618	0	\$0		X
CT		X	L.P. Interests	2	\$7,700,000	0	\$0	ļ	X
DE		X	L.P. Interests	14	\$79,940,310	0	\$0	-	X
DC	ļ			_				<del> </del>	
FL	ļ	X	L.P. Interests	2	\$2,355,328	0	\$0		X
GA		X	L.P. Interests	1	\$384,208	0	\$0 	<u> </u>	×
HI									
ID									
IL 		X	L.P. Interests	4	\$12,250,010	0	\$0		X
IN	<u> </u>								
IA		X	L.P. Interests	1	\$100,002	0	\$0		X
KS	-			<del> </del>	2072.004		•••	<u> </u>	<del> </del>
KY.	-	X	L.P. Interests	1	\$250,001	0	\$0		X
LA		-						<u> </u>	-
ME				-					-
MD	<del> </del>		I. D. Indianada	<del> </del>	640.500.000				<del> </del>
MA		X	L.P. Interests	2	\$10,500,000	0	\$0		X
MI	<del> </del>	- X	L.P. Interests	1	\$2,000,000	0	\$0	<del> </del>	X
MN		X	L.P. Interests	2	\$365,004	0	\$0	<del> </del>	X
MS	<del> </del>				ļ				ļ
МО								<u> </u>	<u> </u>

# **APPENDIX**

1	2	2	3		5				
	Intend to non-ac investors (Part B -	ccredited	Type of security and aggregate offering price offered in state (Part C – Item 1)		Type of investor and Amount purchased in State (Part C – Item 2)				
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No
MT									
NE					·				
NV		×	L.P. Interests	2 4	\$655,620	0	\$0 		X
NH		×	L.P. Interests	1	\$113,948	0	\$0		X
NJ		Х	L.P. Interests	2	\$2,100,000	0	\$0		X
NM					<u> </u>		·		
NY		X	L.P.Interests	7	\$25,968,818	0	\$0		Х
NC									
ND									ļ
ОН		X	L.P. Interests	5	\$2,409,504	0	\$0		X
ОК			1514		<b>^</b>				
OR PA		X	L.P. Interests	1	\$500,000	0	\$0		X
RI	<u></u>							ļ	
SC	-		<del></del>					-	
SD									
TN									-
TX		X	L.P. Interests	2	\$1,500,000	0	\$0		X
UT									
VT								<u> </u>	
VA			-						
WA		X	L.P. Interests	3	\$31,074,692	0	\$0		X
wv									
WI									
WY									
PR			,						
L			L	_l	<u> </u>				